## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

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SMALL ENTITY

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TOTAL FEE(S) DUE

\$1700

DATE DUE

10/03/2006

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/601,119	06/19/2003	John K. Shimmick	18158-011610	6002

TITLE OF INVENTION: INTEGRATED SCANNING AND OCULAR TOMOGRAPHY SYSTEM AND METHOD

ISSUE FEE

\$1400

FXAMINER	ART UNIT	CLASS-SUBCLASS	
LYONS, MICHAEL A	2877	356-503000	
hange of correspondence address or indication of R. 1.651.  L Change of correspondence address (or Change Address form PTO/SB/122) attached.  J "Fee Address" indication (or "Fee Address" Ind PTO/SB/122) or more recent) attached. I Number is required.	of Correspondence	2. For printing on the patent front page, list 1) the names of up to 3 registered patent attorneys 7 against OR, alternatively. 3) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is steed, no name will be printed.	Townsend&Townsend&Crew LL  John K. Shimmick  3

PLEASH NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

APPLN, TYPE

nonprovisional

PUBLICATION FEE

\$300

VISX, INCORPORATED SANTA CLARA, CA (US) Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🚨 Corporation or other private group entity 🔲 Government 4a. The following feets) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.

XI Issue Fee XI Publication Fee (No small entity discount permitted)

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

XI Advance Order - # of Copies 10

□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTH: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

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Typed or printed name John K. Shimmick

Registration No. 44,335

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